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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

387863

OMB APPROVAL

OMB Number: 3235-0076

Expires: APRIL 30, 2008

Estimated average burden hours per response...... 16.0



THE FARTISTE LIMITED LIABILIT		es changed, and II	idicate change.)			
Filing Under (Check box(es) that app Type of Filing: [X] New Filing [] Amen	47	{ } Rule 505	[X] Rule 506	[] Section 4(6)	[] ULOE	
	A. BA	SIC IDENTIFICAT	ION DATA			
1. Enter the information requested about	out the issuer					
Name of Issuer (check if this is an am THE FARTISTE LIMITED LIABILIT		changed, and ind	icate change.)			
Address of Executive Offices (Numbe 112 East 73rd Street, New York, NY 100		, Zip Code) Teleph	one Number (Incl	uding Area Code)		
Address of Principal Business Operati (if different from Executive Offices)	ions (Number and Stree	t, City, State, Zip (Code) Telephone	Number (Including Are	PROCES	SFD
Brief Description of Business Producti	on of live stage musical T	HE FARTISTE Off	Broadway in New	York City	,	_
Type of Business Organization					JAN 29 2	יוטטי
[] corporation	[] limited partnersh	ip, already formed	• • [X] other (please specif		
[] business trust	[] limited partnersh	ip, to be formed	1	Limited Liability Compa	iny FINANCI	AL
		Month Year		<u></u>	2021	
Actual or Estimated Date of Incorpora	tion or Organization: (October 24, 2006		[X] Actual [] Estimate	ed	
Jurisdiction of Incorporation or Organi CN for Canada; FN for other foreign ju		U.S. Postal Servi	ce abbreviation for	State:		
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an seq. or 15 U.S.C. 77d(6). When to File: A notice must be filed Securities and Exchange Commission address after the date on which it is d Where to File: U.S. Securities and Excopies Required: Five (5) copies of signed must be photocopies of manual Information Required: A new filing muchanges thereto, the information required and the Appendix need not be filed with Filing Fee: There is no federal filing fee State: This notice shall be used to indicate the sequence of the	no later than 15 days an (SEC) on the earlier of ue, on the date it was mechange Commission, 45 this notice must be file ally signed copy or bear ist contain all information ested in Part C, and anoth the SEC.	fter the first sale of f the date it is reco salled by United St 50 Fifth Street, N.V d with the SEC, of typed or printed s n requested. Ame y material changes	of securities in the sived by the SEC ates registered or V. Washington Done of which mus gnatures. Indicate the information of	offering. A notice is d at the address given be certified mail to that ac C. 20549. t be manually signed. y report the name of th tion previously supplied	eemed filed with the elow or, if received a dress. Any copies not made issuer and offering d in Parts A and B. In those states that	e U.S. at that unually g, any Part E
adopted ULOE and that have adopted						

the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in

ATTENTION

appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filling of a

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the

the notice constitutes a part of this notice and must be completed.

federal notice.

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A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and	l mana	iging partner of	partnership issuers.					
ck Box(es) that Apply:	[]	Promoter [X]	Beneficial Owner []	Executive Officer	[]	Director	[X]	General and/o

Check Box(es) that Apply:	[]	Promoter [X]	Beneficial Owner	[]	Executive Officer	[]	Director	[X]	General and/or Managing Partner
Full Name (Last name first, i Ratter Productions Limited Lia			ر با داد در						
Business or Residence Addi 112 East 73rd Street, New York	ess (I	Number and Stre 10021 (Business	eet, City, State, Zip Address)	Code)	····		1 - P	
Check Box(es) that Apply:	[]	Promoter [X]	Beneficial Owner	[X]	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, i Procter, Diane (President of Ra			Liability Company)						
Business or Residence Addi 112 East 73rd Street, New York				Code)				
Check Box(es) that Apply:	[]	Promoter []	Beneficial Owner	[]	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, i	findiv	ridual)	and the second s			<u> </u>			
Business or Residence Add	ess (l	Number and Str	eet, City, State, Zip	Code))				
Check Box(es) that Apply:	[]	Promoter []	Beneficial Owner	[]	Executive Officer	[]	Director	0	General and/or Managing Partner
Full Name (Last name first,	f indiv	ridual)	(1964) 1964 (1964) 1964 (1964) 1964 (1964) 1964 (1964) 1964 (1964) 1964 (1964) 1964 (1964) 1964 (1964) 1964 (1964) 1964		n englis e mane, e indometil e l'empere l'es Ne l'ann est au é l'an				
Business or Residence Add	ess (Number and Str	eet, City, State, Zip	Code))				
Check Box(es) that Apply:	[]	Promoter []	Beneficial Owner	[]	Executive Officer	[]	Director	0	General and/or Managing Partner
Full Name (Last name first,	f indi	ridual)	andre a second and	. V		<i>2.</i>			المنظمية المنظمة
Business or Residence Add	ess (Number and Str	eet, City, State, Zip	Code)	a la del colonia	de willester — vi tame a t-rease.es	-	normaline estimated for I Chamanian laster, extensions for
Check Box(es) that Apply:	[]	Promoter []	Beneficial Owner	[]	Executive Officer	[]	Director	0	General and/or Managing Partner
Full Name (Last name first,	findi	vidual)	}- 			<u> </u>			
Business or Residence Add	ress (Number and Str	eet, City, State, Zip	Code))				

B. INFORMATION ABOUT OFFERING

4 114						A		and the Alexander		and the purpose of the same of	Yes	No
						on-accredi	ted investo	rs in this of	пеппд? 	•••	[X]	[]
			olumn 2, if t stment tha			m any indi	vidual?		ļ - k		\$ <u>1.000</u> ,	00
3. Does	the offerin	ng permit jo	oint owners	ship of a si	ngte unit?						Yes [X]	No []
any con the offe SEC an	nmission o ring. If a po d/or with a	r similar re erson to be state or s	emuneration e listed is a tates, list t	n for solici in associat he name o	tation of pu ted person f the broke	irchasers i or agent o r or dealer	n connection of a broker of the contract of th	or given, di on with sale or dealer re an five (5) tion for that	es of secui gistered w persons to	rities in rith the be listed		
Full Nar N/A	me (Last n	ame first, i	f individual)							21	
Busines	s or Resid	lence Add	ress (Numb	per and St	reet, City, S	State, Zip (Code)			4		
Name o	of Associat	ed Broker	or Dealer						<u> </u>			
			ed Has Sol individual		tends to S	olicit Purch	asers	\		Y-	[] All State	es
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) [MO] [PA] [PR]
Full Nar	me (Last n	ame first, i	f individual	l)	resident state of the state of	·		7 - 100 A	<u> </u>			
Busines	ss or Resid	lence Add	ress (Numi	ber and St	reet, City, \$	State, Zip (Code)					
Name o	of Associat	ed Broker	or Dealer									
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Name o	of Associat	ed Broker	or Dealer						1		<u></u>	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
			ed Has Sol individual		ntends to S	olicit Purci	nasers				[] All Stat	es
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ \$	\$ \$ 0
[]Common [] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (SpecifyLLC Interest).	\$1,000,000	\$ 0
Total	\$1,000,000	\$ 0
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	1	
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	0	\$0
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of	Dollar Amount
Type of offering	Security	Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		(1 e
Printing and Engraving Costs		
Legal Fees		ii š
Accounting Fees		[] \$
Engineering Fees		[] \$
Other Expenses (identify)		[] \$
Total		[j š
1		· · ·

b. Enter the difference between the aggregate offering price given in response to Part C - Questie expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross p		. \$
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an esti and check the box to the left of the estimate. The total of the payments listed must equal the adjugross proceeds to the issuer set forth in response to Part C - Question 4.b above.	mate	
	Payments to Officers, Directors, & Affiliates	Payments To
Salaries and fees		. []\$
Purchase of real estate	[]\$. []\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$. []\$
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of		
securities involved in this offering that may be used in	[] S	71¢
exchange for the assets or securities of another issuer	L 3 - P	
pursuant to a merger)	f1 s	[]\$
Working capital	[]\$	
Other (specify, Est.): Physical Production \$126,500; Fees \$117,518; Rehearsal Salaries \$85,61		
Casting & Rehearsal Expenses \$4,200; Prelim. Advig. & Promotion \$100,000; General & Administration \$183,182; Bonds, Deposits & Advances \$137,986; Reserve \$245,000	[]\$. []\$
The state of the s	[]\$	[X] \$ 1,000,000
Column Totals	[]\$	[X]\$ <u>1,000,000</u>
Total Payments Listed (column totals added)	[X] \$1,000,000	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)
THE FARTISTE LIMITED LIABILITY COMPANY

Name of Signer (Print or Type)
Diane Procter

Signature

Date
January

2007

Title of Signer (Print or Type) |
Manager of RATTER PRODUCTIONS LIMITED LIABILITY COMPANY,
Manager of THE FARTISTE LIMITED LIABILITY COMPANY

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

Yes No
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?

See Appendix, Column 5, for state response.

2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.

3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.

4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) THE FARTISTE LIMITED LIABILITY COMPANY	Signature	Date January 2007
Name of Signer (Print or Type) Diane Procter	Title (Print or Type) Manager of RATTER PRODUCTIONS LIMITEI Manager of THE FARTISTE LIMITED LIABILIT	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to sel to non-accre investors in (Part B-Item	edited State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of invest amount purch (Part C-Item 2	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
				Number of Accredited		Number of Non-Accre	dited			
	Yes	No	 	Investors	Amount	Investors		Amount	Yes	No
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1	Intend to se		3 Type of security and aggregate offering price	4 Type of inves	5 Disqualification under State ULOE (if yes, attach explanation of					

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•	investors in State		offered in state	amount purc	amount purchased in State (Part C-Item 2)					
	(Part B-Iter	m 1)	(Part C-Item 1)	(Part C-Item	2)	<u> </u>		waiver granted) (Part E-Item 1)		
				Number of		Number of !		1		
State	Yes	No	1	Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No	
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